

Patent Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested

Classification::

Suggested Group Art

Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?:: CD

Computer Readable

Form (CRF)?:: Yes

Number of copies of CRF::

Title:: LOW ENERGY REGENERABLE SO₂ SCRUBBING
PROCESS

Attorney Docket Number:: 10539-12

Request for Early

Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 4

Small Entity?:: Yes

Latin Name::

Variety denomination

name::

Petition included?:: No

Petition Type::

Licensed US Govt.

Agency::

Contract or Grant

Numbers::

Secrecy Order in

Parent Appl.?:: No

Applicant Information

Inventor Authority Type:: Inventor

Primary Citizenship

Country:: Canada

Status:: Full Capacity

Given Name:: Leo

Middle Name:: E.

Family Name:: HAKKA

Name Suffix:: Mr.

City of Residence:: Montreal

State or Prov. Of

Residence:: Quebec

Country of Residence:: Canada

Street of mailing address:: 8475 ave Christophe-Colomb, Suite 2000

City of mailing address:: Montreal

State or Province of

mailing address:: Quebec
Country of mailing address:: Canada
Postal or Zip Code of
mailing address:: H2M 2N9

Inventor Authority Type:: Inventor

Primary Citizenship
Country:: Canada
Status:: Full Capacity

Given Name:: John
Middle Name:: Nicolas
Family Name:: SARLIS
Name Suffix:: Mr.
City of Residence:: Chomedey
State or Prov. Of
Residence:: Quebec
Country of Residence:: Canada
Street of mailing address:: 5008, 4e rue
City of mailing address:: Chomedey, Laval

State or Province of
mailing address:: Quebec
Country of mailing address:: Canada
Postal or Zip Code of
mailing address:: H7W 4S2

Inventor Authority Type:: Inventor

Primary Citizenship

Country:: Canadian
Status:: Full Capacity

Given Name:: Paul
Middle Name:: Joseph
Family Name:: Parisi
Name Suffix:: Mr.
City of Residence:: St-Lambert
State or Prov. Of
Residence:: Quebec
Country of Residence:: Canada
Street of mailing address:: 116 rue Dulwich
City of mailing address:: St-Lambert
State or Province of
mailing address:: Quebec
Postal or Zip Code of
mailing address:: J4P 2Y7

Inventor Authority Type:: Inventor

Primary Citizenship

Country:: Canadian
Status:: Full Capacity

Given Name:: Patrick
Middle Name:: M.
Family Name:: Ravary

Name Suffix:: Mr.
 City of Residence:: Dalkeith
 State or Prov. Of
 Residence:: Quebec
 Country of Residence:: Canada
 Street of mailing address:: 22295 Binette RD
 City of mailing address:: Dalkeith
 State or Province of
 mailing address:: Montreal
 Country of mailing address:: Dalkeith
 Postal or Zip Code of
 mailing address:: K0B 1E0

NOTE: REPEAT THIS INFORMATION FOR EACH INVENTOR OR OTHER APPLICANT.

Correspondence Information

Correspondence Customer

Number:: 001059
 Phone Number:: 416-957-1695
 (Max. 3 telephone numbers)
 Fax Number:: (416) 361-1398
 E-Mail Address:: pmdcosta@bereskinparr.com
 (Max. 3 e-mail addresses)

Representative Information

Representative	
Customer Number::	001059

Domestic Priority Information

Application::	Continuity Type::	Par nt	Parent Filing
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		Application::	Date::
This Application			

Foreign Priority Applications

Country::	Application Number::	Filing Date::	Priority Claimed

Assignee Information

Assignee name::

Street of mailing address::

City of mailing address::

State or Province of

mailing address::

Country of mailing address::

Postal or Zip Code of

mailing address::